Virginia Department of Health (VDH) Central Office Madison Building 109 Governor Street, Richmond, VA 23219 Mezzanine Conference Room— 11:00 a.m. - 2:00 p.m.

Attended in Richmond: State Health Commissioner: Marissa J. Levine, MD, MPH, FAAFP,; Adrienne McFadden, MD, JD, FACEP, FAAEM, FCLM; Emmanuel Eugenio, MD, FAAP; Cecily Rodriguez, MPA; Luisa F. Soaterna-Castaneda, BS, MPH; Linda Redmond, PhD; Keisha L. Smith, MPA; Grace S. Lambert, MHA, MPA; Kate S. K. Lim, MT, (ASCP), FACHE, CPHQ, Karen Reed, MA, CDE; Augustine Doe, MS, MPA; Attended Via Polycom/Phone: Melody Armstrong, MPA, BSNCPHRM

Did Not Attend: Patti Kiger, M. Ed (PhD); J. Elisha Burke, M.Div., D.Min.; Beth O'Connor, M. Ed, BA; Elizabeth Locke, PhD, PT; Gloria Addo-Ayensu, MD, MPH; Maia McCuiston Jackson, MD, FAAP; Kathryn E. MacCormick, MSc.

WELCOME

Dr. Redmond called the meeting to order and asked everyone to introduce themselves.

ADOPTION OF AGENDA

The July meeting agenda was approved as submitted.

ACHDHE RECOMMENDATIONS TO THE COMMISSIONER

On behalf of ACHDHE, Dr. Linda Redmond read and delivered ACHDHE's recommendation from the April 12, 2016 meeting presentations to the State Health Commissioner.

APPROVAL OF MINUTES

The April 12, 2016 meeting minutes were approved as submitted.

STATE HEALTH COMMISSIONER'S UPDATES

Dr. Marissa J. Levine

Dr. Levine shared that she and Dr. McFadden regretted missing the last meeting, but they were pleased to represent the state at the CDC's first Health Equity conference where the Virginia Health Opportunity Index was recognized. Since the last meeting, the office changed its name to Health Equity. The support of ACHDHE was appreciated. In April the office convened a listening session for Virginia's eleven Native American tribes, in which six tribes participated. It elicited a number of concerns and, as a result, vital records staff and local health departments have been engaged with these leaders in seeking solutions. She expressed confidence that Health Equity provides the appropriate framework to do a better job in community collaboration. At the last meeting Joe Hilbert announced that Dr. Hughes Melton would join the agency as Chief Deputy Commissioner. Dr. Melton is from southwest Virginia and is an expert in substance abuse issues. He will regularly spend time in southwest to strengthen the VDH presence in the area.

The Governor asked Dr. Levine to coordinate state efforts to respond to the Zika virus. She gave an update on what is known and requested everyone's assistance in getting information to as many people as possible. Information in a number of formats and in Spanish is at www.ZikaVA.org. Information sheets in Spanish, French, Arabic, Korean, Mandarin, Tagalog, Creole and Portuguese are available at http://www.cdc.gov/zika/fs-posters/#mosquitocontrol. Dr. Levine expressed concern for low income communities with no mosquito control. She reminded members that Congress was about to embark on a seven week recess and had yet to authorize funding to combat Zika. Resources and strong campaigns to prevent the spread of the disease will reduce costs in the long run. This effort fits into the Virginia Plan for Well-Being, targeting resources to address those most at risk.

ACHDHE Feedback:

 An ACHDHE member questioned why some exhibiting symptoms did not want to be tested for the Zika virus. Discussion followed on the need to develop strategies to overcome resistance and mechanisms to disseminate information as it comes available.

PRESENTATIONS

"Virginia's Language Needs Assessment"

Justin Crow, Health professional Shortage Area (HPSA) Designations, Global Information Systems (GIS) Manager, Office of Health Equity, VDH
Anna Riggan, Spatial Epidemiologist, Office of Health Equity, VDH

Mr. Crow explained this new online tool to help Local Health Departments know and plan for Limited English Proficiency (LEP) people living in their area. He defined terms used: LEP reflects a limited ability to read, write, speak or understand English. He noted that a bilingual employee eligible to interpret is a staff person who has successfully completed a language proficiency assessment and the appropriate training to provide medical interpretation in a given language.

The information presented in the Language Needs Assessment includes: census information from 2014 on people who speak English less than well, the school ESL population, the number of LEP clients seen at the health department and the usage of telephonic interpreter services. The website provides recommendations for providing translated materials and on-site interpretation services derived from the guidance offered by the U.S. Health and Human Services (HHS), Office of Civil Rights. The Guidance explains that the obligation to provide meaningful access is fact-dependent and starts with an individualized assessment that balances four factors:

- 1. The number or proportion of LEP residents within the district.
- 2. The frequency with which LEP individuals come into contact with VDH programs.
- 3. The nature and importance of the program, activity or service provided.
- 4. The resources available to the grantee/recipient (VDH) and the costs of interpretation/ translation services

VDH is required to ensure free quality interpretation for all LEP clients. Recommendations for onsite interpretation (500 encounters in a language) and translation of documents (the lessor of 5% or 1000 encounters) reflect the safe harbor compliance recommendations of the Guidance. In conclusion, Mr. Crow explained that there is no "one size fits all" solution to address language access needs.

Anna Riggan demonstrated the use of Virginia's Language Needs Assessment in Tableau, software designed to help one visualize data. This resource identifies languages spoken in Virginia by locality and health district and makes recommendations based on the four factor analysis.

ACHDHE members questioned the information used to make recommendations and if agency objectives are served with these.

ACHDHE Feedback:

• In reply to ACHDHE members' questions regarding the recommendations, Dr. McFadden shared that the recommendations were based on federal guidance but ACHDHE members are welcome to suggest consideration of other factors.

"Southwest VA Health Literacy Initiative"

Dr. Jamie Zoellner, Associate Professor in Human Nutrition, Foods and Exercise, Virginia Polytechnic Institute and State University

Dr. Jamie Zoellner presented (via video teleconference) on the Southwest Virginia Health Literacy Initiative on behalf of Drs. Cantrell, Counts and O'Dell of the Virginia Department of Health and Virginia Tech. They have been working together since 2011 on a nutrition literacy project that focuses on VDH's organizational-level health literacy in Southwest Virginia as well as individual-level health literacy.

Further explaining, Dr. Zoellner shared the project's three components:

- 1. Background information literacy is a major problem and well hidden. In the past the focus was primarily on the client, now it's recognized that the target audience is providers: goal is that client reports that the provider gave easy to understand information, took enough time, offered assistance in filling forms, and asked for client explanation of next steps. Awareness of the issue was raised at a health literacy conference in May, attended by 300 staff working in health departments in Southwest Virginia.
- 2. Implementation shared SIPsmartER nutrition literacy messaging to reduce consumption of sugar-sweetened beverages. The team had developed a systems-based approach to disseminate and implement an effective sugar-sweetened beverage reduction intervention. Trainings and telephone calls were found to be effective with participants who drank less, lost weight and were able to discuss issues in play as a result.
- 3. Survey Review reported on an online survey completed by SWVA health district staffs. The survey was designed to gather information on organizational-level health literacy to develop a Capacity Building Plan. Domains include: awareness, written communication, spoken communication, patient self-management and empowerment, and supportive systems.

In continuing their work, the group plans to engage leadership in improving the VDH experiences of low health literate clients. Dr. Zoellner concluded with a review of the group's evolving organizational health literacy plan and called on the advisory council for suggestions.

ACHDHE Feedback:

 ACHDHE members raised questions related to medical school training in the subject, whether there outreach to language minority populations, and if there had been translation of materials into other languages.

NEW BUSINESS:

ACHDHE member questioned how they could be more responsive to sharing VDH messages with stakeholders. The members discussed the need to understand VDH communication dissemination plans and possible need for ACHDHE members to identify resources for distributing messages.

ACHDHE Feedback:

 ACHDHE members asked that a presentation on how VDH handles outreach messaging be scheduled for an upcoming meeting.

ACHDHE New Leadership Election:

- Dr. Redmond shared that ACHDHE members will need to select Officers: Chair and Vice Chair for service beginning in January 2017.
- Members are asked to adhere to the following timelines:

 Actions Note: Nominee must be contacted in advance to assure willingness and ability to serve 	
Submit Nominations for Chair and Vice- Chair) positions Note: Send via email to Augustine Doe (<u>Augustine.doe@vdh.virginia.gov</u>)	September 15, 2016
Nominated candidates submit resumes to Augustine Doe via email	October 1, 2016
Ballot/resumes shared with ACHDHE members via email	October 4, 2016
ACHDHE members submit votes to elect new leadership at meeting or via email prior to meeting if not attending in person.	October 11, 2016

ANNOUNCEMENTS AND UPDATES

OMHHE Updates

Ms. Karen Reed shared the follow information on behalf of Dr. McFadden.

Office Name Change:

• Ms. Reed thanked the members of the council for their support of the office name change, from the Office of Minority Health and Health Equity to the Office of Health Equity. The office mission and vision remain the same.

Nursing Scholarship Program:

• The Nursing scholarship application period ended June 30, 2016; there was a great deal of interest. More information will be provided on this at a subsequent ACHDHE meeting.

Virginia's Health Opportunity Index (HOI):

• Virginia's Health Opportunity Index (HOI) continues to gain recognition nationally. Dr. Adrienne McFadden, Mr. Justin Crow and Mr. Rexford Anson-Dwamena will present the HOI at the National Association of City and County Health Official (NACCHO) meeting in Phoenix, Arizona this month.

OHE Staff National Presence Committee/Boards:

The Office of Health Equity staff is represented on numerous boards statewide and across the country.

- Michael Mallon was recently elected to the board of the National Organization of State Offices of Rural Health Associations (https://nosorh.org/).
- Dr. McFadden is a board member of the National association of State Offices of Minority Health (http://www.nasomh.org/).
- Karen Reed is a board member of the Rural Divisional Committee Health Equity Council of the
 Office of Minority Health
 (http://minorityhealth.hhs.gov/npa/templates/browse.aspx?lvl=1&lvlid=42#sites

Rural Health:

 With data provided by the Office of Health Equity, one new Virginia hospital received designation of Critical Access Hospital status allowing them to receive cost-based reimbursement from Medicare.

Danville YHELI:

• The Danville Youth Health Equity Leadership Institute (YHELI) kicked off in June with great success. The program brought together 15 rising 9th graders who were taught leadership and critical thinking skills, two essential characteristics for navigating high school and beyond. YHELI will continue this fall and for four years in Danville at George Washington and J. L. Langston High Schools. We hope to share more about this program at one of your meetings.

ACHDHE New Leadership Election:

• The ACHDHE Chair shared ACHDHE election information. Dr. Redmond informed the members that nominations are due before October 2016 for proper planning and time to orient new members before their first meeting. Please speak with those considering before putting their name forward. For more information, please see the attached ACHDHE election timeline document.

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ACHDHE MEMBER UPDATES

None

ACHDHE MEMBER ACTION ITEMS

ACHDHE members were requested to provide their feedback on the presentations. The links are indicated below.

• VDH Presentation Surveys

"Southwest VA Health Literacy Initiative"
"Virginia's Language Needs Assessment"

PUBLIC COMMENTS

• No public comments.

The meeting was adjourned at 1:55 pm.

Next ACHDHE MEETING: Tuesday, October 11, 2016.

Time: 11:00am - 2:00 pm

Location: Mezzanine Conference Room, VDH Central Office, 109 Governor Street, 23219 or via Polycom

upon request.

Respectfully submitted by:

Augustine Doe, Health Equity Specialist

Minutes reviewed by:

Dr. Linda Redmond, Chair